

COMMONWEALTH OF VIRGINIA
DEPARTMENT OF HOUSING AND COMMUNITY DEVELOPMENT
Technical Assistance Services Office (TASO) and Office of the State Technical Review Board
Main Street Centre, 600 E. Main Street, Suite 300, Richmond, Virginia 23219
Tel: (804) 371-7150, Fax: (804) 371-7092, Email: TASO@dhcd.virginia.gov

APPLICATION FOR ADMINISTRATIVE APPEAL

Regulation Serving as Basis of Appeal (check one):

- ☐ Uniform Statewide Building Code
- ☐ Statewide Fire Prevention Code
- ☐ Industrialized Building Safety Regulations
- ☐ Amusement Device Regulations

Appealing Party Information (name, address, telephone number and email address):

Opposing Party Information (name, address, telephone number and email address of all other parties):

Additional Information (to be submitted with this application)

- ☐ Copy of enforcement decision being appealed
- ☐ Copy of record and decision of local government appeals board (if applicable and available)
- ☐ Statement of specific relief sought

CERTIFICATE OF SERVICE

I hereby certify that on the _____ day of _____, 201_, a completed copy of this application, including the additional information required above, was either mailed, hand delivered, emailed or sent by facsimile to the Office of the State Technical Review Board and to all opposing parties listed.

Note: This application must be received by the Office of the State Technical Review Board within five (5) working days of the date on the above certificate of service for that date to be considered as the filing date of the appeal. If not received within five (5) working days, the date this application is actually received by the Office of the Review Board will be considered to be the filing date.

Signature of Applicant: _____

Name of Applicant: _____
(please print or type)